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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name  Write the name that is on	Oscar First name	First name
your government-issued picture identification (for example, your driver's license or passport	Middle name Cruz	Middle name
Bring your picture identification to your meeting with the trustee.	Last name Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX	xxx - xx-
Security number or federal Individual Taxpayer Identification number	or 9 xx - xx-	OR 9 xx - xx-
(ITIN)		

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About Debtor 1:  About Debtor 2 (Spouse Only in a Joint Case):  1. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Business name  CIN  CIN  CIN  Du Page County  If your mailing address is different from the one above, fill it in here. Note that the court will sand any notices to you at this mailing address.  Number Street  Number Street  County  If Debtor 2 lives at a different address:  Number Street  County  If your mailing address is different from the one above, fill it in here. Note that the court will sand any notices to this mailing address is different from yours, fill it in here. Note that the court will sand any notices to this mailing address.  Number Street  City State Zip Code	Det	otor 1 Oscar First Name	Middle Name Last Name	Case number (if known)
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business name  EIN  EIN  EIN  ### Debtor 2 lives at a different address:    The property of t				
and Employer Identification Numbers (EIN) you have used in the last 8 years    Include trade names and doing business as name			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Business name   Business nam		and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Include trade names and doing business as names  EIN  EIN  EIN  5. Where you live    1537 Sacramento Dr		Numbers (EIN) you	Business name	Business name
EIN  EIN  EIN  EIN  EIN  5. Where you live    1537 Sacramento Dr   Number   Street   Number   Street   Street		8 years	Business name	Business name
5. Where you live    1537 Sacramento Dr   Number   Street			EIN	EIN
1537 Sacramento Dr Number Street  Hanover Park Illinois 60133 City State Zip Code  Du Page County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  City State Zip Code  County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number Street  Number Street  City State Zip Code  City State Zip Code  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			EIN	EIN
Number Street  Hanover Park Illinois 60133 City State Zip Code  Du Page County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  City State Zip Code  County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number Street  City State Zip Code  6. Why you are choosing this district to file for bankruptcy  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	5.	Where you live		If Debtor 2 lives at a different address:
City State Zip Code  Du Page County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  City State Zip Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number Street  City State Zip Code  City State Zip Code  6. Why you are choosing this district to file for bankruptcy  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				Number Street
Du Page County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  Street  City State Zip Code  City State Zip Code  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  City State Zip Code  City State Zip Code  Check one:  Check one:  Check one:  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			·	City State Zip Code
above, fill it in here. Note that the court will send any notices to you at this mailing address.    Number   Street   Street				County
City State Zip Code  Check one:  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			above, fill it in here. Note that the court will send any	fill it in here. Note that the court will send any notices to
6. Why you are choosing this district to file for bankruptcy  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			Number Street	Number Street
6. Why you are choosing this district to file for bankruptcy  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
choosing this district to file for bankruptcy  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			City State Zip Code	City State Zip Code
lived in this district longer than in any other district.		choosing this district		
I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)		to file for bankruptcy	lived in this district longer than in any other district.	lived in this district longer than in any other district.
			I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Oscar	Cruz Case number (if known)
	First Name	Middle Name Last Name
Pa	rt 2: Tell the Court Abo	Your Bankruptcy Case
7.	The chapter of the Bankruptcy Code you are choosing to file under	neck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for ankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	No.
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	No.     Yes. Debtor
11.	Do you rent your residence?	No. Go to line 12.  Yes. Has your landlord obtained an eviction judgment against you?  ✓ No. Go to line 12.  Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Oscar Cruz Case number (if known) Middle Name Last Name First Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Oscar Cruz Case number (if known)

Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Oscar Cruz Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Oscar Cruz Signature of Debtor 1 Signature of Debtor 2 4/20/2018 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Oscar		Cruz	Case number (if k	(nown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed unc	ler Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the Iso certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the	information in the schedu	ules filed with the petition is incorrect.
attorney, you do not		. ,		·
need to file this page.	/s/ Yisroel Y Moskov	vits	Date	4/20/2018
	Signature of Attorney for		MI	M / DD / YYYY
	-			
	Yisroel Y Moskovits			
	Printed name			
	Semrad Law Firm			
	Firm name			
	10 N. Martingale Road			
	Street			
	Suite 400			
	Outle 400			
	Schaumburg		Illinois	60173
	City		State	Zip Code
	-			•
	Contact phone	3122543191	Email address	imoskovits@semradlaw.com
			Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Oscar		Cruz
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

П	Check if this is an
_	amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$6,407.00
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$6,407.00 —
Part 2: Summarize Your Liabilities	
	<b>Your liabilities</b> Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$16,023.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$5,267.00
Your total liabilities	\$21,290.00
Part 3: Summarize Your Income and Expenses	
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$1,251.47
Copy your combined monthly income from line 12 of Schedule I	· ·
5. Schedule J: Your Expenses (Official Form 106J)	\$1,250.00

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Debtor 1 Oscar Cruz Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  $\square$ 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,632.57 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	inforn	nation to identify your	case:			
Debtor 1		Oscar		Cruz		
Debtor 2		First Name	Middle N	Name Last Name		
(Spouse, if fi	ling)	First Name	Middle N	Name Last Name		
United Sta	ates Ba	ankruptcy Court for the	: Northern	District of Illinois		
Case num	nber			(State)		
Officia	al Fo	orm 106A/B				Check if this is an amended filing
Sche	dul	e A/B: Prope	erty			12/1
category v responsibl write your	where le for s name	you think it fits best. supplying correct info a and case number (if	Be as complete a prmation. If more s known). Answer e	ist an asset only once. If an asset fits in more the and accurate as possible. If two married people a space is needed, attach a separate sheet to this every question. nd, or Other Real Estate You Own or Have	re filing together, both a form. On the top of any a	are equally
_				in any residence, building, land, or similar prope		
V		Go to Part 2			•	
	Yes.	Where is the property?				
1.1	Stree	t address, if available, o	r other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	the amount of any secu	claims or exemptions. Put tred claims on <i>Schedule D:</i> hims Secured by Property.
				Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Num	ber Street State	Zip Code	Land Investment property Timeshare Other	Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
				Who has an interest in the property? Check	Check if this is co (see instructions)	mmunity property
				one.		
				Debtor 1 only		
				Debtor 2 only Debtor 1 and Debtor 2 only		
				At least one of the debtors and another		
				Other information you wish to add about this is property identification number:	tem, such as local	
If you	own c	or have more than one,	list here:	property identification number.		
1.2	Stree	t address, if available, o	r other description	What is the property? Check all that apply.  Single-family home	the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> nims Secured by Property.
	-			Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Num	ber Street		Land		
	Nulli	dei Stieet		Investment property Timeshare	Describe the nature of interest (such as fee set the entireties, or a life	simple, tenancy by
	City	State	Zip Code	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this inproperty identification number:	Check if this is co (see instructions)	emmunity property

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Debtor 1	Oscar First Name	Middle Name	Cruz Last Name	Case numbe	r (if known)	
1.3 Stre	et address, if available, or oth		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
			Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Other information you wish to add	nother	(see instructions)	mmunity property
	the dollar value of the por ve attached for Part 1. Wr	ite that number h	<b>.</b>	luding any entrie	s for pages	
ou own t	hat someone else drives. If y ns, trucks, tractors, sport uti	<b>equitable interes</b> ou lease a vehicle,	t in any vehicles, whether they are also report it on Schedule G: Execut cycles	-	-	
3.1	s Make Model: Year:		Who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information: 2000 Honda Civic		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit		Current value of the entire property? \$612.00	Current value of the portion you own? \$612.00
3.2	Make Model: Year:		who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information: 2008 Infinity G35		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		Current value of the entire property? \$5095.00	Current value of the portion you own? \$5095.00
			Check if this is communit	y property (see		

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tor 1	Oscar	Cruz Case num	Der <i>(if known)</i>	
	First Name Mid	ddle Name Last Name	· · · · · ·	
3.3	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Pured claims on Schedule aims Secured by Property  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage:	Who has an interest in the property? Check one.  Debtor 1 only	the amount of any sect Creditors Who Have Cla	claims or exemptions. Pured claims on Schedule aims Secured by Property
	Other information:	Debtor 2 only  Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		At least one of the debtors and another  Check if this is community property (see		
	nples: Boats, trailers, motors, persor	instructions)  TVs and other recreational vehicles, other vehicles, and according watercraft, fishing vessels, snowmobiles, motorcycle accessor		
Exar	nples: Boats, trailers, motors, persor  No  Yes  Make	instructions)  TVs and other recreational vehicles, other vehicles, and according to the property? Check	ories  Do not deduct secured	
Exar	nples: Boats, trailers, motors, persor No Yes	instructions)  IVs and other recreational vehicles, other vehicles, and according to the property of the prope	Do not deduct secured the amount of any secu	claims or exemptions. Pured claims on Schedule aims Secured by Property  Current value of the
Exar	nples: Boats, trailers, motors, persor  No  Yes  Make  Model: Year:	instructions)  FVs and other recreational vehicles, other vehicles, and according to the property? Check one.  Debtor 1 only	Do not deduct secured the amount of any secured Creditors Who Have Cla	ured claims on Schedule aims Secured by Propert
Exar	Make Model: Approximate mileage:  Other information:  Make Model: Year:	who has an interest in the property? Check one.  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured the amount of any secured the amount of any secured the entire property?  Do not deduct secured the amount of any secured the	ured claims on Schedule aims Secured by Propert Current value of the
4.1	Make Model:  Make  Other information:  Make  Model:  Make  Model:  Make  Model:  Make	instructions)  FVs and other recreational vehicles, other vehicles, and acceptance and watercraft, fishing vessels, snowmobiles, motorcycle accessors.  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured the amount of any secured the amount of any secured the entire property?  Do not deduct secured the amount of any secured the	claims or Schedule ured claims on Schedule ured by Propert Current value of the portion you own?  claims or exemptions. For the claims on Schedule

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Debtor 1 Oscar Cruz Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... cellphone \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Clothing \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No **✓** Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$300.00 for Part 3. Write that number here ......

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Debtor 1 Oscar Cruz Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: \$0.00 Chase \$400.00 17.2. Checking account: FifthThird 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Dep.	tor 1 Uscar	Middle Name	Cruz Lost Nome	Case number (if known)		
20.		orate bonds and other negotiab				
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.					
		ents are those you cannot transfer	to someone by signing	g or delivering them.		
	✓ No					
	Yes. Give specific information about	Issuer name:				
	them	issuel fiame.				
21.	Retirement or pension				-	
	_	RA, ERISA, Keogh, 401(k), 403(b)	, thrift savings accounts	s, or other pension or profit-sharing plans		
	✓ No	Type of account:	Institution name:			
	Yes. List each account	401(k) or similar plan:				
	separately.	Pension plan:			-	
		IRA:				
		Retirement account:				
		Keogh:			-	
		Additional account:			-	
		Additional account:				
22.	Security deposits and	prepayments				
		d deposits you have made so that with landlords, prepaid rent, public				
	companies, or others	with landiords, prepaid ferti, public	dullilles (electric, gas, w	rater), telecommunications		
	<b>✓</b> No		Institution name:			
	Yes	Electric:				
		Gas:				
		Heating oil:				
		Security deposit on rental unit:				
		Prepaid rent:				
		Telephone:				
		Water:				
		Rented furniture:			_ :	
		Other:				
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	r a number of years)		
	<b>✓</b> No					
	Yes	Issuer name and description:				

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Debte	or 1 Oscar First Name	Cruz	Case number (if known)	
0.4		Middle Name Last Name		
24.	26 U.S.C. §§ 530(b)(1), 529A(b)	A, in an account in a qualified ABLE program, or under b), and 529(b)(1).	er a qualified state tuition program.	
	No Institution name	and description. Separately file the records of any interes	sts.11 U.S.C. § 521(c):	
25.		terests in property (other than anything listed in line	e 1), and rights or powers	
	exercisable for your benefit		, ,	
	Yes. Describe			
26.		<ul> <li>arks, trade secrets, and other intellectual property nes, websites, proceeds from royalties and licensing agre</li> </ul>	ements	
	✓ No  Yes. Describe			
27.	Licenses, franchises, and oth Examples: Building permits, ex	ner general intangibles clusive licenses, cooperative association holdings, liquor	licenses, professional licenses	
	✓ No			
	Yes. Describe			
Mon	ey or property owed to yo	u?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or property owed to yo  Tax refunds owed to you	u?		portion you own? Do not deduct secured
		u?		portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No  ☐ Yes. Give specific information	on	Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reference of the property of the pr	on whether eturns	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific information about them, including you already filed the reand the tax years	on whether eturns		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific informatic about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur	on whether eturns	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur	on whether sturns  n alimony, spousal support, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific informatic about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur	on whether sturns  n alimony, spousal support, child support, maintenance,	State:  Local:  divorce settlement, property settlemen	portion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur	on whether sturns  n alimony, spousal support, child support, maintenance,	State: Local: divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur	on whether sturns  n alimony, spousal support, child support, maintenance,	State: Local:  divorce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur  ✓ No  Yes. Give specific information	on whether sturns  In alimony, spousal support, child support, maintenance, on	State: Local:  divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur  No  Yes. Give specific information  Other amounts someone owe Examples: Unpaid wages, disab	on whether sturns  In alimony, spousal support, child support, maintenance, on	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur  ✓ No  Yes. Give specific information  Other amounts someone owe  Examples: Unpaid wages, disab Social Security benefit	whether eturns an alimony, spousal support, child support, maintenance, an	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including you already filed the reand the tax years  Family support  Examples: Past due or lump sur  No  Yes. Give specific information  Other amounts someone owe Examples: Unpaid wages, disab	whether eturns  an alimony, spousal support, child support, maintenance,  bn  s you  ility insurance payments, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Oscar		Cruz	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance police Examples: Health, disability, of		n savings account (HSA); credit, I	nomeowner's, or renter's insurance	
	Yes. Name the insurance of each policy and list its	company	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property the lf you are the beneficiary of a property because someone h	living trust, expect pr		cy, or are currently entitled to receive	
	✓ No Yes. Describe				
33.	Claims against third partie  Examples: Accidents, employ  No		ou have filed a lawsuit or made ance claims, or rights to sue	a demand for payment	
24	Yes. Describe	uuidatad alaima af a	work nature, including courts	claims of the debter and rights	
34.	to set off claims	juidated claims of e	very nature, including counter	claims of the debtor and rights	
	Yes. Describe				
35.	Any financial assets you di	d not already list			
	Yes. Describe				
36.		-	Part 4, including any entries fo		\$400.00
Dort	Describe Any Rusin	ooo Polotod Prop	orty Vou Own or Hoye on I	ntoroat In List any roal actato in Part	4
Part	_	_	_	nterest In. List any real estate in Part	1.
37.	Do you own or have any leg	gal or equitable inte	rest in any business-related pi		
	No. Go to Part 6. Yes. Go to line 38.			<b>pc</b> Do	urrent value of the ortion you own? o not deduct secured claims
38.	Accounts receivable or co	nmissions you alrea	dy earned	Ŭ.	CACITIFICATION
	Ves. Describe				
39.	Office equipment, furnishin Examples: Business-related of		modems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, electr	onic devices
	✓ No ☐ Yes. Describe				

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Deb	tor 1 Oscar	Cruz Case number (if	known)
ı	First Name	Middle Name Last Name	
40.	Machinery, fixtures, e	equipment, supplies you use in business, and tools of your trade	
	<b>✓</b> No		
	Yes. Describe		
	ш		
41.	Inventory		
	<b>✓</b> No		
	Yes. Describe		
	Tes. Describe		
		<u> </u>	
42.	Interests in partnersh	nips or joint ventures	
	✓ No		
		Name of entity: % of	ownership:
	Yes. Give specific information about		
	them		<del></del>
40.4	O		
43.	Customer lists, mailing	g lists, or other compilations	
	<b>✓</b> No		
	Yes. Do your lists i	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Desc	cribe	<del></del>
	A b	Lance de la Pelanta de la Pela	
44.	Any business-related	property you did not already list	
	<b>✓</b> No		
	Yes. Give specific		<del></del>
	information		
			<del></del>
			<del></del>
		all of your entries from Part 5, including any entries for pages you have attache	
DI P	art 5. Write that numbe	er here	
Part	6. Describe Any F	arm- and Commercial Fishing-Related Property You Own or Have ar	Interest In.
· u.·	If you own or have ar	n interest in farmland, list it in Part 1.	
46.	Do you own or have a	any legal or equitable interest in any farm- or commercial fishing-related prope	rtv?
		,	Current value of the
	No. Go to Part 7.		portion you own?
	Yes. Go to line 47.	•	Do not deduct secured claims
			or exemptions
47.	Farm animals Examples: Livestock, p	ooultry farm-raised fish	
	LAMITHIES. LIVESTOCK, P	oouluy, iaim-iaiseu iisii	
	<b>✓</b> No		
	Yes. Describe		
	_		

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Deb <sup>1</sup>	tor 1 Oscar		Cruz	Case number (if known)	
	First Name	Middle Name	Last Name		
48.	Crops-either growing or h	narvested			
	✓ No				
	Yes. Describe				
40					
49.	Farm and fishing equipme	ent, implements, machinery, fix	tures, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
50.	Farm and fishing supplies				
		, ,			
	No No Deceribe				
	Yes. Describe				
51.	Any farm- and commercia	al fishing-related property you o	lid not already list		
	<b>✓</b> No				
	Yes. Describe				
		<u></u>		-	
52. A	dd the dollar value of all of	f your entries from Part 6, inclu	ding any entries for page	es you have attached	
for Pa	art 6. Write that number he	ere			
				_	
	Describe All Duese			Not I let Alicer	
Part		rty You Own or Have an Int		Not List Above	
53.	Do you have other propert Examples: Season tickets, c	ty of any kind you did not alreadountry club membership	dy list?		
		ountry olds momeolomp			
	110				
	Yes. Give specific information				
54. A	dd the dollar value of all of	f your entries from Part 7. Write	that number here		<b>,</b>
Part	List the Totals of Ea	ach Part of this Form			
55. <b>I</b>	Part 1: Total real estate, lin	ne 2		<b>&gt;</b>	
E 6 -	and O tatal vahialas lina E				
oo.	part 2 total vehicles, line 5		\$5707.00		
57. <b>P</b>	art 3: Total personal and h	ousehold items, line 15	\$300.00		
58. <b>P</b>	art 4: Total financial asset	s, line 36	\$400.00	<del></del>	
59 I	Part 5: Total business-relat	ted property, line 45	4100.00	<del></del>	
				<u> </u>	
b∪. <b>I</b>	'art 6: 10tal farm- and fish	ing-related property, line 52		<u></u>	
61. <b>I</b>	Part 7: Total other property	y not listed, line 54			
62.	Гotal personal property. Ad	ld lines 56 through 61	\$6407.00		+ \$6407.00
	•		φυ4υ1.00	Copy personal property total ►	+ φυ4υ/.00
					ФС 407.00
63 <b>T</b>	otal of all property on Sch	edule A/B. Add line 55 + line 62			\$6407.00
JJ. 1	J proporty on Jone				i .

		Case 18-11642	Doc 1 Filed 0 Docu		4/20/18 15:42:05 62	Desc Main
Fill	in this inforr	nation to identify your case:				
Deb	otor 1	Oscar First Name	Middle Name	Cruz Last Name	7	
	otor 2	First Name	Middle Name	Last Name		
				sistrict of Illinois		
	e number			(State)		
	<u> </u>	Form 106C			_	Check if this is an amended filing
Sc	hedule	C: The Proper	ty You Claim a	s Exempt		04/16
For stat the tax-und you	each item e a specif amount o exempt re er a law ti r exemption	es, write your name and n of property you claim ic dollar amount as exe f any applicable statuto etirement funds—may b hat limits the exemption on would be limited to t	case number (if known as exempt, you must sompt. Alternatively, you ry limit. Some exempt be unlimited in dollar and to a particular dollar he applicable statutor aim as Exempt	). specify the amount of the umay claim the full fair nations—such as those for hamount. However, if you camount and the value of y amount.	exemption you claim. On arket value of the prophealth aids, rights to reclaim an exemption of 1 the property is determi	One way of doing so is to perty being exempted up to ceive certain benefits, and 100% of fair market value ined to exceed that amount,
1.	<b>—</b> v	•	•	ren if your spouse is filing with options. 11 U.S.C. § 522(b)(3)	you.	
		re claiming federal exempt		. , , , ,		
2.	_	-		xempt, fill in the information	below.	
		ription of the property and hedule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption y Check only one box for each	·	fic laws that allow exemption
	Brief description	:	\$612.00		735	5 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

\$5,095.00

✓

Line from

Brief

Schedule A/B:

description:

Line from

Schedule A/B:

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

, 2000 Honda Civic

<u>, 2008 Infini</u>ty G35

03

100% of fair market value, up to any

\$0

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

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Debtor 1 Oscar Cruz Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$100.00 description: **✓** \$100.00 cellphone 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 07 735 ILCS 5/12-1001(a) \$200.00 description: **✓** \$200.00 Clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) description: \$0.00 **✓** \$0 Checking account, 100% of fair market value, up to any Chase applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief description: \$400.00  $\checkmark$ \$400.00 Checking account, 100% of fair market value, up to any FifthThird

applicable statutory limit

Line from Schedule A/B:

17

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Fill in	this information to identify your ca	ase:			
Debto	or 1 Occor	Cruz			
Debic	or 1 Oscar First Name	Middle Name Last Name			
Debto	or 2				
(Spous	e, if filing) First Name	Middle Name Last Name			
United	d States Bankruptcy Court for the:	Northern District of Illinois			
Case	number	(State)			
(If knov	vn)			_	• • • • • • •
Off	icial Form 106D			L	Check if this is a amended filing
Scl	hedule D: Credit	ors Who Have Claims Secure	ed by Prop	erty	12/1
		ble. If two married people are filing together, both are equ			formation. If
		onal Page, fill it out, number the entries, and attach it to t	this form. On the top	of any additional pa	ages, write your
	and case number (if known).	actived by your preparty?			
1. I	Do any creditors have claims s	ecured by your property? nit this form to the court with your other schedules. You hav	o nothing also to ran	ort on this form	
ļ	<b>_</b>	·	re nouning else to rep	Ort Ort trils form.	
	Yes. Fill in all of the informatio	n below.			
Part	1: List All Secured Claims				
2.		itor has more than one secured claim, list the creditor	Column A	Column B	Column C
	. ,	han one creditor has a particular claim, list the other creditors the claims in alphabetical order according to the creditor's	Amount of claim Do not deduct the	Value of collateral	Unsecured portion
	name.	3 · · · · · · · · · · · · · · · · · · ·	value of collateral.	that supports	If any
_				this claim	
2.1	KANE CTY TH Creditor's Name	Describe the property that secures the claim:	\$5,023.00	\$612.00	\$4,411.00
	P.O. BOX 1360	36 Automobile			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	ELGIN IL 60121 City State ZIP Code	Unliquidated			
	Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from a lawsuit			
	Check if this claim relates	Other (including a right to offset)			
	to a community debt  Date debt was 10/2016	Last 4 digits of account number0143			
	incurred	Last 4 digits of account number			
2.2	CONSUMER FINANCIAL SVC Creditor's Name	Describe the property that secures the claim:	\$11,000.00	\$5,095.00	\$5,905.00
	10431 US HIGHWAY 19	2008 Infinity G35   Value: \$5,095.00			
	Number Street	As of the date you file, the claim is: Check all that apply.			
	PORT BIOLIEV EL 04000	Contingent			
	PORT RICHEY FL 34668 City State ZIP Code	Unliquidated			
	Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from a lawsuit			
	Check if this claim relates	Other (including a right to offset)			
	to a community debt  Date debt was	Last 4 digits of account number			
	incurred	•			
	Add the dollar value of here:	your entries in Column A on this page. Write that number	\$16,023.00		

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Fill i	n this inforr	nation to identify your c	ase:					
Deb	tor 1	Oscar		Cruz				
		First Name	Middle Name	Last Name				
	tor 2 use, if filing)	Et al Name	NAC-Julia Nilana	Leal Mana				
(Spoi	use, ii iiiirig)	First Name	Middle Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If knd	e number own)			. ,				
Off	icial Fo	orm 106E/F				Che	ck if this is an	n amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have Unse	cured Claims			12/15
Form clain the e know	106A/B) ans that are entries in the that are entries in the entrie	nd on Sc <i>hedule G: Exe</i> listed in <i>Schedule D: C</i> ne boxes on the left. At	cutory Contracts and Une reditors Who Hold Claims	expired Leases (Official s Secured by Property.	<ul> <li>Also list executory contracts Form 106G). Do not include a If more space is needed, copy top of any additional pages, v</li> </ul>	ny creditor the Part yo	s with partia ou need, fill i	ally secured t out, number
1.	-	editors have priority un ão to Part 2.	secured claims against y	ou?				
2.	listed, iden As much a Continuati	tify what type of claim it is possible, list the claims on Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority amoun ding to the creditor's nan particular claim, list the o		both priority	and nonprior	rity amounts.
						Total claim	Priority amount	Nonpriority amount

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Debte	or 1 Oscar	Cruz	Case number (if known)	
	First Name Middle Name	Last Name		·
Part :	2: List All of Your NONPRIORITY Unsecured Clain	ns		
[	Do any creditors have nonpriority unsecured claims agains No. You have nothing to report in this part. Submit this to research.	-	e court with your other schedules.	
<b>4.</b> L	List all of your nonpriority unsecured claims in the alphabe unsecured claim, list the creditor separately for each claim. For each	ach claim l	er of the creditor who holds each claim. If a creditor has more isted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou	cluded in Part 1.
				Total claim
4.1	CAPITALONE		Last 4 digits of account number1658	\$343.00
	Nonpriority Creditor's Name PO BOX 30253		When was the debt incurred? 9/2014	
	Number Street		As of the date you file, the claim is: Check all that apply.	
			Contingent	
	SALT LAKE CITY Utah 84130		Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		<u></u>	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	브		Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt Is the claim subject to offset?		debts  Other. Specify CreditCard	
	No		<u> </u>	
	Yes			
4.0				<b></b>
4.2	I C SYSTEM INC Nonpriority Creditor's Name		Last 4 digits of account number 6764	\$2,477.00
	PO BOX 64378		When was the debt incurred? 10/2017	
	Number Street		As of the date you file, the claim is: Check all that apply.	
			Contingent	
	SAINT PAUL Minnesota 55164 City State Zip Code		Unliquidated	
	Who incurred the debt? Check one.		Disputed	
	✓ Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	At least one of the debtors and another		divorce that you did not report as priority claims	
	Check if this claim relates to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT	
	✓ No		Officer. Specify Official Content of Content	
	Yes			
4.3	KANE COUNTY TEACHER C		Last 4 digits of account number 0164	\$2,447.00
	Nonpriority Creditor's Name PO BOX 1360		When was the debt incurred? 10/2016	
	Number Street		As of the date you file, the claim is: Check all that apply.	
			Contingent	
	ELGIN Illinois 60121		Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only			
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	브		Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt		debts  Other. Specify  InstallmentLoan	
	Is the claim subject to offset?  No		Other. SpecifyinstallmentLoan	
	□ Voo			

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Debtor 1 Oscar Cruz Case number (if known)

i ii st inai	ne wildervane Last warne			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	atistical reporting purpo	oses only
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
nom ruit i	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00	
	amount here.  6e. Total. Add lines 6a through 6d.	6e.	\$0.00	]
	oe. Total. Add illes oa tillough od.	oe.		
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write	6i.	\$5,267.00	
	that amount here.			1
	6i Total Add lines 6f through 6i	6i	\$5,267.00	

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Debtor 1	Oscar		Cruz	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	
(If known)				

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			Do	cument Paç	ge 27 of 62	2
Fill in	this infor	mation to identify your c	ase:			
Debto	or 1	Oscar		Cruz		
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e, if filing)	First Name	Middle Name	Last Name		
United	d States B	ankruptcy Court for the:	Northern	District of Illinois		
Case	number			(State)		
(If know		-				<u> </u>
						Check if this is an amended filing
Offi	icial	Form 106H				
Sch	odul	e H: Your Coc	lohtore			12/15
						nd accurate as possible. If two married people are
	Do you I No Ye Within t	r every question.  nave any codebtors? (If  S  he last 8 years, have yo	you are filing a joint case, o	do not list either spouse	e as a codebtor.)	ity property states and territories include Arizona,
		a, Idano, Louisiana, Neva o. Go to line 3.	ua, New Mexico, Fuerto Air	co, rexas, washington,	and wisconsin	)
			mer spouse, or legal equi	valent live with you at	the time?	
		No				
		Yes. In which commu	nity state or territory did y	ou live?	Fill in tl	ne name and current address of that person.
		Name of your spouse, f	former spouse, or legal equ	ivalent		
		Number Street				
		City	State	Zip (	Code	
3.	again as	s a codebtor only if that	t person is a guarantor or	cosigner. Make sure	you have liste	use is filing with you. List the person shown in line 2 d the creditor on Schedule D (Official Form 106D), chedule E/F, or Schedule G to fill out Column 2.
	Column	1: Your codebtor				mn 2: The creditor to whom you owe the debt
3.1	Cruz M	oliona			Office	
2.1	Cruz, Me	51155d			<b>—</b>	Schedule D, line 2.2

60133

Zip Code

1537 Sacramento Dr,

Illinois

State

Street

Number

City

Hanover Park

Schedule E/F, line\_\_\_\_\_

Schedule G, line

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				9		
Fill in this inform	ation to identify	your case:				
	car		Cruz			
	st Name	Middle Name	Last Na	ame	Che	eck if this is:
Debtor 2 (Spouse, if filing) First	et Name	Middle Name	Last Na	ame	— I п	An amended filing
					1 5	A supplement showing post-petition chapter 1
United States Ban the:	kruptcy Court for	Northern	District of Illin	nois tate)		expenses as of the following date:
Case number			(0	iaioj		
(If known)						MM / DD / YYYY
Official Fo	rm 106I					
Schedule	I: Your In	come				12/1
information abou spouse. If more s number (if know	it your spouse. I space is needed	f you are separated and , attach a separate shed y question.	d your spous	se is not fil	ng with you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
1. Fill in your em	ployment		Debtor 1			Debtor 2
information.		Employment status				
•	re than one job,	Employment status	✓ Emplo	-		Employed
attach a separa information abo	rate page with bout additional		☐ Not En	nployed		Not Employed
employers.		Occupation	Worker			
•	ie, seasonal, or	Employer's name	Surge Staff	fing		
self-employed	work.	Employer's address	1110 Mors	eo Poad		
Occupation ma or homemaker,	y include student if it applies.		Number Street			Number Street
			Columbus City	Ohio State	43229 Zip Code	City State Zip Code
		How long employed there?				
		Nonthly Income				
Estimate month spouse unless yo		the date you file this form	1. If you have	nothing to re	eport for any line, v	write \$0 in the space. Include your non-filing
	n-filing spouse have ch a separate she		combine the i	information	for all employers fo	or that person on the lines below. If you need
				F	or Debtor 1	For Debtor 2 or non-filing spouse
-	•	ary, and commissions (befor , calculate what the monthly w		2.	\$1,564.33	
3. Estimate an	d list monthly over	time pay.		3.	+ \$0.00	
4. Calculate gi	oss income. Add li	ne 2 + line 3.		4.	\$1,564.33	

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Deb	otor 1 <u>Oscar</u> First Name		Cruz Last Name		Case number	r <i>(if</i>		
	riist name	Middle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
C	opy line 4 here		$\rightarrow$	4.	\$1,564.33			
	st all payroll dedu							
		and Social Security deductions		5a.	\$312.87			
5	b. Mandatory cont	ributions for retirement plans		5b.	\$0.00			
5	c. Voluntary contri	ibutions for retirement plans		5c.	\$0.00			
5	d. Required repay	ments of retirement fund loans		5d.	\$0.00			
5	e. Insurance			5e.	\$0.00			
5	f. Domestic suppor	rt obligations		5f.	\$0.00			
5	g. Union dues			5g.	\$0.00			
5	h. Other deduction	ns. Specify:	_	5h. +	\$0.00 +			
6. <b>A</b> ( +5h.		uctions. Add lines 5a + 5b + 5c + 5d + 5e +5	if + 5g	6.	\$312.87			
7. <b>C</b> a	alculate total mon	thly take-home pay. Subtract line 6 from line	e 4.	7.	\$1,251.47			
8. <b>Li</b>	st all other income	e regularly received:						
8	business, profes	-						
	gross receipts, or	nt for each property and business showing rdinary and necessary business expenses, and	t					
_	the total monthly			8a.	\$0.00			
	b. Interest and div			8b.	\$0.00			
8	dependent regu							
		spousal support, child support, maintenance, it, and property settlement.		8c.	\$0.00			
8	d. <b>Unemployment</b>	compensation		8d.	\$0.00			
8	e. Social Security			8e.	\$0.00			
8	Include cash assistance the	nt assistance that you regularly receive stance and the value (if known) of any non-nat you receive, such as food stamps (benefits mental Nutrition Assistance Program) or s		8f.	\$0.00			
8	g. Pension or retir	rement income		8g.	\$0.00			
8	h. Other monthly i	ncome. Specify:		8h. +	\$0.00 +			
9. <b>A</b>	dd all other incom	e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h.	9.	\$0.00			
	•	income. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing s		10.	\$1,251.47		=	\$1,251.47
Ir fr	nclude contributions iends or relatives.	ular contributions to the expenses that you from an unmarried partner, members of your mounts already included in lines 2-10 or amo	r househol	d, your	dependents, your roomn	•		
s	pecify:						11. +	\$0.00
		the last column of line 10 to the amount in the Summary of Schedules and Statistical Su				,	12.	\$1,251.47
							ļ	Combined monthly income
13. <b>I</b>	No.	ncrease or decrease within the year after	you file th	is form	?			
	Yes. Explain:							

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		Do	cument Page 30 of 6	02	
Fill in this infor	mation to identify your	case:			
Debtor 1	Oscar		Cruz		
D. I	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	Э
United States B	ankruptcy Court for the	e: Northern	District of Illinois		owing post-petition chapter 13
Case number		·	(State)	expenses as of th	e following date.
(If known)				MM / DD / YYYY	
	Form 106J • <b>J: Your E</b> x	penses			12/15
information. If i	-	d, attach another sheet to the	e are filing together, both are equ his form. On the top of any additio		
1. Is this a join	nt case?				
✓ No. Go	to line 2				
	oes Debtor 2 live in a	separate household?			
	<b>¬</b> No				
<u> </u>	_	file Official Forms 106.I-2 Fx	penses for Separate Household of De	ehtor 2	
2 Do you have		No	sorred to coparate ricaestroid of 20		
Do not list D		Yes. Fill out this information fo	Dependent's relationship to	Dependent's	Does dependent live
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you?
	enses include	No			
than	people other				
yourself and dependents	-	Yes			
		Monthly Expenses			
-	f a date after the ban		s you are using this form as a sup supplemental Schedule J, check t		-
		-cash government assistand it on Schedule I: Your Incom			Your expenses
	or home ownership or the ground or lot. 4.	expenses for your residence	. Include first mortgage payments ar	nd	<b>\$100.00</b>
If not incl	uded in line 4:				
4a. Real es	state taxes				4a <b>\$0.00</b>

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Oscar Scruz
 Cruz Last Name
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities:         6.0. Utilities:           6. Utilities:         6.0. Section(N), heat, natural gas         6.0.         \$0.00           6. Day Mater, seever, garbage collection         6.0.         \$0.00           6. Chelephone, cell phone, Internet, satellite, and cable services         6.0.         \$0.00           6. Chelephone, cell phone, Internet, satellite, and cable services         6.0.         \$0.00           6. Chelephone, cell phone, Internet, satellite, and cable services         6.0.         \$0.00           6. Cheling and chell cell phone, cell phone, Internet, satellite, and cable services         6.0.         \$0.00           7. Food and housekeeping supplies         7.         \$200,00           8. Childcare and childrer's education costs         8.         \$0.00           9. Clothing, Laurdry, and dry cleaning         9.         \$4.00           10. Personal care products and services         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, include age, maintenance, bus or train fare.         \$0.00           13. Entertainment, clubse, recreation, newspapers, magazines, and books         14.         \$0.00           15. Install insurance <th< th=""><th>First Name</th><th>Middle Name Last Name</th><th></th><th></th></th<>	First Name	Middle Name Last Name		
6. Utilities:         6. Electricity, healt, natural gas         6. \$0.00           6b. Water, sewer, garbage collection         6b. \$0.00           6b. Uther, Specify:         6c. \$80.00           6b. Uther, Specify:         6c. \$80.00           6b. Uther, Specify:         6d. \$80.00           7b. Food and housekeeping supplies         8. \$0.00           8b. Childcare and children's education costs         8. \$0.00           9b. Clothing, laundry, and dry cleaning         9. \$40.00           10. Personal care products and services         10. \$25.00           11. Medical and dental expenses         11. \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12. \$250.00           1b. Instrationality, clubs, recreation, newspapers, magazines, and books         13. \$0.00           1c. Instrationality, clubs, recreation, newspapers, magazines, and books         13. \$0.00           1b. Instrationality, clubs, recreation, newspapers, magazines, and books         13. \$0.00           1c. Instrationality, clubs, recreation, newspapers, magazines, and books         13. \$0.00           1b. Install his surance         15a. \$150.00           1b. Install his surance         15a. \$150.00           1b. Install his surance         15a. \$150.00           1b. Ty chitcle insurance. Specify:         15c. \$150.00				Your expenses
68. Electricity, heat, natural gas         6a.         \$0.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, oall phone, internet, satellitie, and cable services         6c.         \$80.00           6d. Other. Specify.         6d.         \$9.00           7. Food and housekeeping supplies         7.         \$200.00           8. Childcare and children's education costs         9.         \$40.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas maintenance, bus or train fare.         12.         \$25.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instrationment, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Instrationance, and support the service of the product in lines 4 or 20.         \$0.00         \$0.00           15. Life insurance         156         \$150.00         \$0.00           15. Life insuran	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$60.00           6d. Other. Specify:         7c.         \$200.00           7c. Food and housekeeping supplies         7c.         \$200.00           8c. Childcare and children's education costs         8c.         \$0.00           9c. Othitra, Isaundry, and dry cleaning         9c.         \$40.00           10. Personal care products and services         11c.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           15. Insurance         12.         \$250.00           16. Charitable contributions and religious donations         13.         \$0.00           15. Insurance         15a.         \$0.00           15b. Health insurance         15a.         \$0.00           15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Vehicle insurance         15a.         \$0.00           15c. Vehicle insurance         15a.         \$0.00           15c. Vehicle insurance         15a.         \$0.00           15c. Taxes. Do not include taxes dedu	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$60.00           6d. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$200.00           8. Childcare and children's education costs         8.         \$9.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           15. Instraction, environmental face, business and environmental face, business a	6a. Electricity, heat, natural g	gas	6a.	\$0.00
6d. Other. Specify         6d         \$0.00           7. Food and housekeeping supplies         7.         \$200.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$250.00           10. Include care payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         15.         \$0.00           15. Insurance.         15         \$0.00           15. List insurance         15         \$0.00           15. Leath insurance deducted from your pay or included in lines 4 or 20.         \$1         \$0.00           15. Leath insurance.         15	6b. Water, sewer, garbage of	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$200.00           8. Childcare and childcare's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$25.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15s         \$0.00           15. Insurance.         15s         \$0.00           15b. Health insurance educated from your pay or included in lines 4 or 20.         15c         \$150.00           15c. Vehicle insurance. Specify:         15c         \$0.00           15c. Vehicle insurance. Specify:         15c         \$1.00 <td>6c. Telephone, cell phone, I</td> <td>nternet, satellite, and cable services</td> <td>6c.</td> <td>\$60.00</td>	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$60.00
8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15a. Life insurance deducted from your pay or included in lines 4 or 20.         15b. Health insurance         15a.         \$0.00           15b. Health insurance         15b. Charitable continuous de taxes deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           15c. Vehicle insurance. Specify:         15b. Charitable continuous de taxes deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           17. Installment or lease payments:         17a.         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning         9. 340.00           10. Personal care products and services         10. 255.00           11. Medical and dental expenses         11. 255.00           12. Transportation, Include gas, maintenance, bus or train fare.         12. 250.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. 8.00           14. Charitable contributions and religious donations         14. 8.00           15. Insurance.         15. Insurance           Do not include insurance deducted from your pay or included in lines 4 or 20.         15. Secondary           15. Lie in insurance         156. 250.00           15. Cyehicle insurance         156. 250.00           15. Vehicle insurance. Specify:         156. 250.00           15. Vehicle insurance. Specify:         156. 250.00           15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         156. 250.00           15. Vehicle insurance. Specify:         156. 250.00           17. Installment or lease payments:         176. 250.00           17. Car payments for Vehicle 1         176. 250.00           17. Cother. Specify:         176. 250.00           17. Cother. Specify:         176. 250.00           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your i	7. Food and housekeeping su	pplies	7.	\$200.00
10. Personal care products and services       10.       \$23.00         11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$250.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a.       \$0.00         15b. Health insurance       15a.       \$0.00         15c. Vehicle insurance       15b.       \$0.00         15c. Vehicle insurance       15c.       \$150.00         15c. Vehicle insurance. Specify:       15c.       \$0.00         15c. Vehicle insurance. Specify:       15c.       \$0.00         15c. Vehicle insurance. Specify:       15c.       \$0.00         15c. Vehicle resurance. Specify:       15c.       \$0.00         15c. Vehicle resurance. Specify:       15c.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17c. Installment or lease payments.       17c.       \$40.00         17b. Car payments for Vehicle 1       17c.       \$0.00	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$250.00         12. Intensportation. Include gas, maintenance, bus or train fare. Do not include car payments       13.       \$20.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15b. Health insurance       15b. Health insurance       15c. Vehicle insurance       17c. Other. Specify:	9. Clothing, laundry, and dry	cleaning	9.	\$40.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$250.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   14.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance.	10. Personal care products a	nd services	10.	\$25.00
Do not included car payments   13.   20.00   14.   20.00   14.   20.00   14.   20.00   15.   1	11. Medical and dental exper	nses	11.	\$25.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       30.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15b. \$0.00         15b. Lhealth insurance       15b. \$0.00       15b. \$0.00         15c. Vehicle insurance       15c. \$150.00       15d. \$0.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         17. Installment or lease payments:       16       \$0.00         17. Installment or lease payments:       17a. \$400.00       \$0.00         17b. Car payments for Vehicle 1       17a. \$400.00       \$0.00         17c. Other. Specify:       17c. \$0.00       \$0.00         17c. Other. Specify:       17c. \$0.00       \$0.00         18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or r	-		12.	\$250.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.	14. Charitable contributions	and religious donations	14.	\$0.00
15b. Health insurance         15b         \$0.00           15c. Vehicle insurance         15c         \$150.00           15d. Other insurance. Specify:         15d         \$0.00           16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           Specify:         16         \$0.00           17. Installment or lease payments:         16         \$0.00           17. Locar payments for Vehicle 1         17a         \$400.00           17b. Car payments for Vehicle 2         17b         \$0.00           17c. Other. Specify:         17c         \$0.00           17d. Other. Specify:         17d         \$0.00           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).         18.           19. Other payments you make to support others who do not live with you.         19.         \$0.00           20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.         20a         \$0.00           20b. Real estate taxes.         20b         \$0.00           20c. Property, homeowner's, or renter's insurance         20c         \$0.00           20c. Property, homeowner's, or renter's insurance         20d         \$0.00           20c. Prop		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance   15c   \$150.00     15d. Other insurance. Specify:	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   \$0.00	15c. Vehicle insurance		15c	\$150.00
Specify:         16           17. Installment or lease payments:         17. Installment or lease payments:           17a. Car payments for Vehicle 1         17a         \$400.00           17b. Car payments for Vehicle 2         17b         \$0.00           17c. Other. Specify:         17c         \$0.00           17d. Other. Specify:         17d         \$0.00           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).         18.           19. Other payments you make to support others who do not live with you.         \$0.00           Specify:         19.         \$0.00           20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.         20a         \$0.00           20b. Real estate taxes.         20b         \$0.00           20c. Property, homeowner's, or renter's insurance         20c         \$0.00           20d. Maintenance, repair, and upkeep expenses.         20d         \$0.00	15d. Other insurance. Speci	fy:	15d	\$0.00
17. Installment or lease payments:       17a. \$400.00         17b. Car payments for Vehicle 1       17a. \$400.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:       17a. \$400.00         17a. Car payments for Vehicle 1       17a. \$400.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease paym	nents:		
17c. Other. Specify:	17a. Car payments for Vehic	cle 1	17a	\$400.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		••		\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		e to support others who do not live with you.	10	<b>#0.00</b>
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		ses not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	\$0.00
20b. Real estate taxes.  20b. So.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. So.00 20d. Maintenance, repair, and upkeep expenses.			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. Waintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20c. Property, homeowner's	s, or renter's insurance		
	20e. Homeowner's associati	ion or condominium dues		

Official Form 106J Schedule J: Your Expenses page 2

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Debtor 1	Oscar			Cruz	Case number (if known)		
	First N	ame	Middle Name	Last Name			
21.Other	r. Spec	ify:				21	\$0.00
22. Calc	ulate	our monthly exper	ises.				\$1,250.00
22a. A	Add lin	es 4 through 21.					\$0.00
22b. (	Сору li	ne 22 (monthly expe	enses for Debtor 2), if any,	from Official Form 106J-2			\$1,250.00
22c. A	Add lin	e 22a and 22b. The	result is your monthly exp	enses.		22.	
23.Calcu	ılate y	our monthly net in	come.				
23a. (	Copy li	ne 12 (your combine	ed monthly income) from	Schedule I.		23a	\$1,251.47
23b. (	Сору у	our monthly expens	ses from line 22 above.			23b	\$1,250.00
			enses from your monthly in	ncome.	e.		\$1.47
	The res	sult is your monthly	net income.			23c	
mort				oan within the year or do yo			

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Fill in this information to identify your case:							
Debtor 1	Oscar		Cruz				
	First Name	Middle Name	Last Name	<u>.</u>			
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			(Otato)				

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	<b>✓</b> No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and						
×	/s/ Oscar Cruz	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 4/20/2018	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill in	this infor	mation to identify your c	ase:					
Debto	or 1	Oscar		Cruz				
Debto	or 2	First Name	Middle N	lame Last N	lame			
(Spous	e, if filing)	First Name	Middle N	lame Last N	lame			
United	d States E	Bankruptcy Court for the:	Northern	District of II	linois State)			
Case (If know	number /n)			,				
Offi	icial	Form 107						Check if this is a amended filing
			l Affaire f	or Individual	s Eiling fo	r Bankru	ntov	04/1
Be as inforn	comple	nt of Financia ete and accurate as po- lf more space is neede own). Answer every qu	ssible. If two ma	arried people are filir	ng together, both	n are equally re	esponsible for s	
Part '	1: Give	Details About Your	Marital Status	and Where You Liv	ed Before			
1.	What is	your current marital sta	itus?					
		rried t married						
2. During the last 3 years, have you lived anywhere other than where you live now?								
	✓ No Yes	s. List all of the places yo	u lived in the last	3 years. Do not includ	de where you live ı	now.		
	Del	otor 1:		Dates Debtor 1 live there	d Debtor 2:			Dates Debtor 2 lived there
					Same as	s Debtor 1		Same as Debtor 1
	Nur	mber Street		From	Number Stre	eet		From To
	City	y State	Zip Code		City	State	Zip Code	
					Same as	s Debtor 1		Same as Debtor 1
	Nur	mber Street		From	Number Stre	eet		From To
	City	y State	Zip Code		City	State	Zip Code	
а	nd territo No	e last 8 years, did you e ries include Arizona, Califo Make sure you fill out So	mia, Idaho, Louis	iana, Nevada, New Mex	ico, Puerto Rico, Te			mmunity property states

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Debtor 1 Oscar Cruz Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages,  $\overline{\mathbf{A}}$ Wages, \$5055.24 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$18000.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$18000.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016 ) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 YYYY For the calendar year before that: (January 1 to December 31, 2016

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Cruz Debtor 1 Oscar Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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(	Uscar			Cri	JZ	Case number	(if known)
F	First Name		Middle Name	Las	t Name		
ide po ent	ers include your erations of whic	relatives; a h you are a for a busin	iny general partner in officer, director, less you operate a	s; relatives of any person in control,	general partners; par or owner of 20% or	tnerships of which y more of their voting	who was an insider? You are a general partner; You securities; and any managing You domestic support obligations,
_	No						
] \	Yes. List all pay	yments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
lr	nsider's Name						
N	lumber Street						
C	City	State	Zip Code				
Ir	nsider's Name						
_							
N 	lumber Street						
_	Nia	Otata	Zin Ondo				
	City	State	Zip Code				
<b>✓</b> N	de payments on No	_	ranteed or cosigne t benefited an ins	·	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
Īr	nsider's Name						
NI	lumber Street						
-	idilibei Sileet						
C	City	State	Zip Code				
Īr	nsider's Name						
N	lumber Street						
_							
C	City	State	Zip Code				

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Debtor 1 Oscar Cruz Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Contract Pending **Dupage County Judicial Center** KCTCU v. Cruz Court Name On appeal 505 North County Farm Road Case number NumberStreet Concluded 18SR177 60187 Wheaton Illinois City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	or 1	Oscar		Cruz	Case number (if known	7)	
		First Name Middle Name		Last Name	<del></del>		
11.		thin 90 days before you filed for bankruptcy, counts or refuse to make a payment becaus			bank or financial institution,	, set off any amou	ints from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action t	he creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of accoun	t number: XXXX-		
		City State Zip Code					
12.		hin 1 year before you filed for bankruptcy, w pointed receiver, a custodian, or another off		y of your property in the	e possession of an assignee f	or the benefit of o	creditors, a court-
	<b>✓</b>	No					
		Yes					
Part	5:	List Certain Gifts and Contributions					
13.	Wi	ithin 2 years before you filed for bankruptcy,	did y	ou give any gifts with a	total value of more than \$60	0 per person?	
	Ė	Yes. Fill in the details for each gift.					
		Gifts with a total value of more than \$600 per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street	<u> </u>				
		City State Zip Code					
		Person's relationship to you					
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code Person's relationship to you					

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	Oscar	Cruz	Case number (if known)	
	First Name Middle Nam	me Last Name	<del></del>	
Wit	thin 2 years before you filed for bankrup	tcy, did you give any gifts or contribut	ons with a total value of more th	an \$600 to any charity?
<b>✓</b>	No			
Ė	l Yes. Fill in the details for each gift or co	ontribution		
Ш	-	onthibation.		
	Gifts or contributions to charities	Describe what you contrib		
	that total more than \$600		contri	buted
	Charity's Name			
	Number Street			
	City State Zip Co	ode		
6:	List Certain Losses			
	hin 1 year before you filed for bankrupto	cy or since you filed for bankruptcy, di	d you lose anything because of t	neft, fire, other disaster, or
gar	nbling?			
<b>V</b>	No			
Ħ	Yes. Fill in the details.			
ш		<b>-</b>		
	Describe the property you lost and how the loss occurred	Describe any insurance co Include the amount that insu		of your Value of property lost
	now the loss occurred	pending insurance claims or		iost
		A/B: Property.	Time do de concaulo	
7:	<b>List Certain Payments or Transfer</b>	re		
	lude any attorneys, bankruptcy petition prep	pankruptcy petition? parers, or credit counseling agencies for s	, ,,,	
	No		, <sub>1</sub> , , ,	
<b>□</b>		parers, or credit counseling agencies for s		
✓	No	parers, or credit counseling agencies for s  Description and value of a	ny property Date p	ayment Amount of
✓	No	parers, or credit counseling agencies for s	ny property Date p	ayment Amount of payment
✓	No Yes. Fill in the details.	parers, or credit counseling agencies for s  Description and value of a transferred	ny property Date p or trai was m	ayment Amount of payment ade
✓	No Yes. Fill in the details.  Semrad Law Firm	parers, or credit counseling agencies for s  Description and value of a	ny property Date p	ayment Amount of payment ade
□	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	parers, or credit counseling agencies for s  Description and value of a transferred	ny property Date p or trai was m	ayment Amount of payment ade
✓	No Yes. Fill in the details.  Semrad Law Firm	parers, or credit counseling agencies for s  Description and value of a transferred	ny property Date p or trai was m	ayment Amount of payment ade
□	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street	parers, or credit counseling agencies for s  Description and value of a transferred	ny property Date p or trai was m	ayment Amount of payment ade
□	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
✓	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
✓	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
□	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
☐ ✓	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not You	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not You	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not Younger Person Who Was Paid	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not Younger Person Who Was Paid	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid  Number Street	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not Younger Person Who Was Paid	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid Number Street  City State Zip Co	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade
	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 6017 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid  Number Street	Description and value of a transferred  Attorney's Fee - 0.00	ny property Date p or trai was m	ayment Amount of payment ade

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Debtor	1 Oscar		Cruz Case	e number <i>(if known)</i>	
	First Name	Middle Name	Last Name		
h D	elp you deal with your cre o not include any payment No	ditors or to make paym		f pay or transfer any property to	anyone who promised to
L	Yes. Fill in the details.				
			Description and value of any proper transferred	rty Date payment or transfer was made	Amount of payment
	Person Who Was Paid				
	Number Street				
	City State	e Zip Code			
	No Yes. Fill in the details.		Description and value of property transferred	Describe any property or payments received or debts in exchange	Date paid transfer was made
	Person Who Received To	ransfer			
	Number Street				
	City State Person's relationship to				
	Person Who Received T	ransfer			
	Number Street				
	City State Person's relationship to	•			
<b>b</b> (T	fithin 10 years before you eneficiary? These are often called asset- No Yes. Fill in the details.		d you transfer any property to a self-set	tled trust or similar device of wh	ich you are a
L			Description and value of the prope	erty transferred	Date transfer was made
	Name of trust				

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Debtor 1 Oscar Cruz Case number (if known) First Name Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Cruz Debtor 1 Oscar Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code

City

State

Zip Code

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Deb		Oscar			Cri		Cas	se number (ii	f known)	
		First Name		Middle Name	Las	st Name				
26.			/ in any judici	al or administra	ative procee	eding under	any environme	ntal law? In	nclude settlements and ord	lers.
		No Yes. Fill in the det	ails.							
				•	Court or age	∍ncy		Nature	of the case	Status of the case
		Case title			Court Name					Pending
		Case number		i	NumberStree	et .				On appeal
				ō	City	State	Zip Code			Concluded
Part	11:	Give Details Ab	oout Your B	usiness or Co	nnections	to Any Bu	siness			
27.	Witl	nin 4 years before	you filed for b	ankruptcy, did	you own a l	business or	have any of the	following c	connections to any busines	s?
			a limited liabi	nployed in a tra lity company (L	-		activity, either turnership (LLP)	full-time or p	oart-time	
		An officer, di	rector, or mar	naging executive	-		ooration			
		No. None of the a			details belov	w for each t	ousiness.			
					Descr	ibe the natu	ire of the busine	ess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			- Name	of accounta	ant or bookkee;	per	Dates business existed	
		City	State	Zip Code					From To	
					Descr	ibe the natu	ire of the busine	ess	Employer Identification include Social Security	
		Business Name			-				EIN:	
		Number Street			- Name	of account	ant or bookkeep	per	Dates business existed	
		City	State	Zip Code	_				From To	
					Descr	ibe the natu	ire of the busine	ess	Employer Identification include Social Security	
		Business Name			-				EIN:	
		Number Street			- Name	of account	ant or bookkeep	per	Dates business existed	
		City	State	Zip Code	_				From To	

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Debt	tor 1	Oscar			Cruz	Case number (if known)
		First Name		Middle Name	Last Name	
28.		hin 2 years before ditors, or other pa	-	r bankruptcy, did you	give a financial statement	t to anyone about your business? Include all financial institutions,
	<b>✓</b>	No				
		Yes. Fill in the de	tails below.			
					Date issued	
		Name			MM/DD/YYYY	
		Hamo				
		Number Street				
		City	State	Zip Code		
			State	Zip Code		
Part	12:	Sign Below				
t	rue a	and correct. I und kruptcy case can	erstand tha	t making a false state	ement, concea <sup>l</sup> ing property r imprisonment for up to 20	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			ture of Debto	r 1		Signature of Debtor 2
		J				Date
		Date	4/20/2018			
D	Did yo	ou attach additio	nal pages to	Your Statement of F	inancial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
Г.	<b>7</b> N	lo				
į	Y	'es				
	Did yo	ou pay or agree to	pay some	ne who is not an atto	orney to help you fill out ba	nkruptcy forms?
Į.	<b>√</b> N	lo				
ן נ	<u> </u>	es. Name of perso	n			Attach the Bankruptcy Petition Preparer's Notice, Declaration. and Signature (Official Form 119).

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Fill in this information to identify your case:						
Debtor 1	Oscar		Cruz			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)			(Giate)			

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
	Creditor's name: KANE CTY TH  Description of property securing debt: 36 Automobile	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. ✓ Yes.				
	Creditor's name: CONSUMER FINANCIAL SVC  Description of property securing debt: 2008 Infinity G35   Value: \$5,095.00	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. ✓ Yes.				
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.				
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.				

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Debto	r Oscar		Cruz	Case number (i	f
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Pe	ersonal Property Lease	s		
inform		l estate leases. Unexpired	leases are leases tha	at are still in effect; the lea	ed Leases (Official Form 106G), fill in the ase period has not yet ended. You may
De	escribe your unexpired person	onal property leases			Will the lease be assumed?
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Le	ssor's name:				□ No □ Yes
	escription of leased operty:				
Part 3	Sign Below				
Und			ny intention about an	ny property of my estate th	at secures a debt and any personal
4 -			<b>A</b> -		
_	/s/ Oscar Cruz Signature of Debtor 1		* =	Signature of Debtor 2	
3	orginature of Debtor 1		5	orginature of Debtof 2	
[	Date 4/20/2018 MM/DD/YYYY		С	Date MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Northern Distric	t or illinois						
n re	Oscar Cruz		Case No.						
	Debtor			(If known)					
			Chapter	Chapter 7					
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY F	OR DEBTOR					
1	<ul> <li>Pursuant to 11 U.S.C. § 329(a) and f compensation paid to me within one rendered or to be rendered on behalf</li> </ul>	year before the filing of the p	petition in bankruptcy, or agreed to	o be paid to me, for services					
	For legal services, I have agreed to a	For legal services, I have agreed to accept							
	Prior to the filing of this statement I	nave received		\$0.00					
	Balance Due			\$1,400.00					
2	. The source of the compensation paid	d to me was:							
	<b>J</b> Debtor	Other (specify)							
3	. The source of the compensation paid	d to me is:							
	<b>✓</b> Debtor	Other (specify)							
4	. I have not agreed to share the abmembers and associates of my l		n with any other person unless the	ey are					
		w firm. A copy of the agreeme	th a other person or persons who a ent, together with a list of the name						
5	. In return for the above-disclosed fee	, I have agreed to render legal	service for all aspects of the bank	kruptcy case, including:					
	<ul> <li>a. Analysis of the debtor's finar bankruptcy;</li> </ul>	icial situation, and rendering	advice to the debtor in determinin	g whether to file a petition in					
	b. Preparation and filing of any	petition, schedules, statemer	nts of affairs and plan which may b	oe required;					
	c. Representation of the debtor	at the meeting of creditors ar	nd confirmation hearing, and any a	adjourned hearings thereof;					
6	. By agreement with the debtor(s), the	above-disclosed fee does no	t include the following services:						
		CERTIFICA	ATION						
	certify that the foregoing is a completor(s) in this bankruptcy proceedings.	te statement of any agreemen	nt or arrangement for payment to n	me for representation of the					
	4/20/2018		/s/ Yisroel Y Moskovits						
	Date		Signature of Attorney						
			Semrad Law Firm						
			Name of law firm						

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### UNITED STATES BANKRUPTCY COURT

**Northern District of Illinois** 

In re:	Cruz, Oscar	Case No.	
	Debtor(s)	0000 110.	
		Chapter.	Chapter7
	VERIF	FICATION OF CREDITOR MAT	RIX
Th knowledge	•	erify that the attached list of creditors is tru	ue and correct to the best of their
Date:	4/20/2018	/s/ Cruz, Oscar	
	_	Cruz, Oscar Signature of Debt	tor

KANE CTY TH P.O. BOX 1360 ELGIN, IL, 60121

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

KANE COUNTY TEACHER C PO BOX 1360 ELGIN, IL, 60121

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

CONSUMER FINANCIAL SVC 509 Green Bay Road Waukegan, IL, 60085 Case 18-11642 Doc 1 Filed 04/20/18 Entered 04/20/18 15:42:05 Desc Main Document Page 55 of 62

Debtor 1 Oscar	Cru:		oer (if known)	
First Name	Wildale Marie	Name		
Part 6: Answer These Qu	estions for Reporting Purposes		11 11 11 11 11 11 11 11 11 11 11 11 11	
16. What kind of debts do you have?	"incurred by an individual pr No. Go to line 16b.  Yes. Go to line 17.	rimarily for a personal, family, or simess debts? Business debts? Business debts estment or through the operation	s are debts that you incurred to obtain on of the business or investment.	and a second of the second of
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund  No.	Do you estimate that after any ex ds will be available to distribute to		}
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	and the second s
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billi	n ion
Part 7: Sign Below			U. A the information provided is true a	and
For you	correct.  If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7.  If no attorney represents me and I out this document, I have obtaine I request relief in accordance with	oter 7, I am aware that I may prunderstand the relief available of did not pay or agree to pay so did and read the notice required the chapter of title 11, United ment, concealing property, or one can result in fines up to \$25, 19, and 3571.	States Code, specified in this petition. bbtaining money or property by fraud in 0,000, or imprisonment for up to 20 years	or 13 æd fill
	Signature of Debtor 1		gnature of Debtor 2  Recuted on	
	Executed on 4/20/2018 MM / DD /		MM / DD / YYYY	

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	tion to identify your C	000.		
Fill in this infor	mation to identify your c	<u>ase.</u>		
Debtor 1	Oscar		Cruz	<del></del>
	First Name	Middle Name	Last Name	
Debtor 2			Lest Nama	<del></del>
(Spouse, if filing)	First Name	Middle Name	Last Name	
Linited States F	Sankruptcy Court for the:	Northern	District of Illinois	
United States L	sankiuptoy Court io. tiros		(State)	
Case number				
(If known)				Check if this is an
	- 4000			amended filing
Official	Form 106De	eC .		
			torio Cobodula	12/15
Declarat	ion About an	individual Dec	tor's Schedule	
U.S.C. §§ 152,	1341, 1519, and 3571.			\$250,000, or imprisonment for up to 20 years, or both. 18
Part 1: Sign	Below			
Did you n	ov or saree to nav some	eone who is NOT an atto	rney to help you fill out bar	kruptcy forms?
Dia you p	ay or agree to pay some			
✓ No				
السندا	Name of person		Attach Bankruptcy	Petition Preparer's Notice, Declaration, and
L Tes.			Signature (Official i	-orm 119).
				with this declaration and
Under pe	nalty of perjury, I declar	re that I have read the su	immary and schedules illet	with this declaration and
that they	are true and correct.	. /		
10/10/	1/200	11/1000	×	
/s/ Osea	of Debtor 1		Signatu	re of Debtor 2

MM/DD/YYYY

Date 4/20/2018

MM/DD/YYYY

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				Cruz	Case number (if known)
Debtor 1	Oscar First Name		Aiddle Name	Last Name	
	40000				
28. Wi	thin 2 years before ye	ou filed for b	ankruptcy, did yo	ou give a financial staten	nent to anyone about your business? Include all financial institutions,
cre	editors, or other part	ies.			
_	No				
$\subseteq$		ilo bolow			
L	Yes. Fill in the detai	iis Delow.		Date issued	
				Date Issued	
	News			MM/DD/YYYY	_
	Name				
	Number Street			<del>_</del>	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	City	State	Zip Code	-	
	<b>=</b>				
Part 12:					
l bas	o read the answers	on this State	ement of Financia	al Affairs and any attach	ments, and I declare under penalty of perjury that the answers are
true	and correct. I under	stand that n	naking a false sta	atement, concealing prop	merty, or obtaining money or property by fraud in connection with o 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571.
a ba	nkruptcy case can re	esult in fines	s up to \$250.000,	or imprisonment for up t	o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		- Ph-	-//1		4
	<b>X</b> / <sub>-/s/0</sub>		W		<b>×</b>
	Signatur	e of Debtor 1			Signature of Debtor 2
	<del>-</del>			Date	
		20/2018			
Did :	مممالة الملمية المساعدة والمساعدة				
	vou attach additiona	I pages to Y	our Statement of	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
_		I pages to Y	our Statement of	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
V	you attach additiona No	I pages to Y	our Statement of	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Officiał Form 107)?
		I pages to Y	our Statement of	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	No Yes				
	No Yes			f Financial Affairs for Indi	
Did	No Yes				

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Debtor	Oscar		Cruz	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired	d Personal Property Leas	es	
For any	unexpired personal pro		Schedule G: Executory Lleases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	cribe your unexpired p	personal property leases		Will the lease be assumed?  ☐ No
Les	sor's name:			Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	cription of leased perty:			
Part 3:	Sign Below			
Unde	er penalty of perjury, I o	declare that I have indicated an unexpired lease.	my intention about any	property of my estate that secures a debt and any personal
_	/s/ Osoar Cruz / /	Wy	<b>★</b>	gnature of Debtor 2
	gnature of Debtor 1  ate 4/20/2018  MM/DD/YYYY	~	Da	

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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Cruz, Oscar  Debtor(s)	Case No	
	233.64,	Chapter.	Chapter7
	VERIFICAT	TION OF CREDITOR MAT	RIX
	above named Debtors hereby verify tha	at the attached list of creditors is tru	ue and correct to the best of their
nowledge.		A	
eate:	4/20/2018	/s/ Cruz, Oscar Cruz, Oscar Signature of Debu	CON VICTORY

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		Cruz	Case number	(if known)	
ebtor 1 Oscar First Name	Middle Name	Last Name			m kg
, iist Naile			Column A Debtor 1	Column B Debtor 2 or non-filing spou	se ·
o the second component	ion		\$0.00		
B. Unemployment compensat Do not enter the amount if younder the Social Security Act.	ou contend that the amount re Instead, list it here:	en en steren exemt ¥			
For you	Control of the second	\$0.00			
For your spouse		\$0.00			
9. <b>Pension or retirement inco</b> benefit under the Social Secu	rity Act.		\$0.00		<del></del>
10.Income from all other sou amount. Do not include any	rces not listed above. Specif benefits received under the So n of a war crime, a crime agair brism. If necessary, list other s	ist humanity, or			
	<u> </u>		.00.00	+	<del>-</del>
Total amounts from separate	pages, if any.		+\$0.00	1	
11. Calculate your total curr	ent monthly income. Add lin	es 2 through 10 for	\$ <u>1,632.57</u>	+	\$1,632.57
each column. Then add the tota	al for Column A to the total for	Column B.			L Total current
					monthly income
art 2: Determine Wheth	or the Means Test Applie	es to You			
art 2: Determine wheth	el die wearis reer, pp.	Tellery those stone:			
2. Calculate your current mo	onthly income for the year.	rollow triese steps.	(	Copy line 11 here →	\$1,632.57
12a. Copy your total current	monthly income from line 11.	with the second	ennemmentenmentenmentenmenten den d	Sopy into 11 more in	
	nber of months in a year).				X 12
Muliply by 12 (are not	al income for this part of the fo	nm.			12b. <u>\$19,590.84</u>
12b. The result is your armu-	al income for this part of the ti				
		= " !b			
3 Calculate the median fami	ly income that applies to yo	ou. Follow these steps.	l		
	de de la companya del companya de la companya del companya de la c	Illinois			
Fill in the state in which you	live.	1			
Fill in the number of people i	n your household.				40
Fill in the median family inco household.		water-selection and every resident consistence	one en e	and the progression of the control of the second of the se	13. <u>\$52,410.00</u>
instructions for this form. In	edian income amounts, go on is list may also be available at	iline using the link specif the bankruptcy clerk's o	ied in the separate ffice.		
4. How do the lines compare	?				
Go to Part 3.	an or equal to line 13. On the				
14b. Line 12b is more to	han line 13. On the top of pag Il out Form 122A-2.	ge 1, check box 2, The p	resumption of abuse is de	termined by Form 122A-	2.
Part 3: Sign Below					
Bu signing here I declare U	nder penalty of perjury that the	e information on this sta	tement and in any attachm	ents is true and correct.	
By signing note, rudelare 1					
11	Chel 11	, ·	•		
X ISTOscar Cruz	////	<b>,</b>			<del></del>
Signature of Debtor 1	-66		Signature of Debtor 2		
Date 4/20/2018			Date 4/20/2018		
MM/DD/YYYY			MM/DD/YYYY		
If you checked line 14a,	do NOT fill out or file Forn 12 fill out Form 122A-2 and file it	2A-2. with this form.			
it you checked line 140,		***************************************			

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1400.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and at tendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$31.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Debtor Initials

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Sem rad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: April 20, 2018

Client

Oscar Cruz

Attorne∳\_

roel V. Moskovits